U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

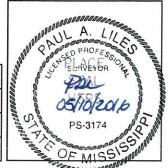
ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

	SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE					
A1.	A1. Building Owner's Name The Housing Authority of the City of Waveland						
A2.	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 503 Camille Circle	Company NAIC Number:					
	City Waveland State MS	ZIP Code 39576					
АЗ.	Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Part of Tax Parcel #162H-0-03-018.00 (building 24)						
A4.							
A5.	Latitude/Longitude: Lat. <u>30d17'14 4"</u> Long, <u>89d22'48.2"</u> Horizontal Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	Datum: ☐ NAD 1927 ■ NAD 1983					
A7.							
A8.	For a building with a crawlspace or enclosure(s): A9. For a building with an a	ttached garage:					
	a) Square footage of crawlspace or enclosure(s) <u>na</u> sq ft a) Square footage of a	ttached garage <u>na</u> sq ft					
	b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade na b) Number of permane within 1.0 foot above	nt flood openings in the attached garage e adjacent grade					
	c) Total net area of flood openings in A8.b <u>na</u> sq in c) Total net area of flood						
	d) Engineered flood openings? Yes No d) Engineered flood op	enings? 🔲 Yes 🔀 No					
	SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATI	ON					
B1.	NFIP Community Name & Community Number B2. County Name City of Waveland 285262 B2. County Name Hancock	B3. State Ms					
B4.	Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use base flood depth)					
	28045C0342 D 10/16/2009 10/16/2009 AE	18					
B10	D. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source:						
R11	L. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source	a.					
100000000000000000000000000000000000000	2. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?	PARAMETER STATE ST					
	Designation Date:/ CBRS OPA						
	SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUI	RED)					
C1.	Building elevations are based on: Construction Drawings* Building Under Construction*	▼ Finished Construction					
	*A new Elevation Certificate will be required when construction of the building is complete.	Control Contro					
C2.	Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/A C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.	AH, AR/AO. Complete Items					
	Benchmark Utilized: GPS RTK-Trimble VRS Network Vertical Datum: NAVD 1988						
	Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Datum used for building elevations must be the same as that used for the BFE.	Other/Source:					
	Check the m	neasurement used.					
	a) Top of bottom floor (including basement, crawlspace, or enclosure floor)						
	b) Top of the next higher floor fee						
	c) Bottom of the lowest horizontal structural member (V Zones only) na fee						
	d) Attached garage (top of slab) na fee						
	e) Lowest elevation of machinery or equipment servicing the building	t meters					
	f) Lowest adjacent (finished) grade next to building (LAG)	t meters					
	g) Highest adjacent (finished) grade next to building (HAG) 19 . 4 See	t meters					
	h) Lowest adjacent grade at lowest elevation of deck or stairs, including na feet structural support	t meters					
	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATI	ON					
his c	certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify eleva	tion					
nforn	nation. I certify that the information on this Certificate represents my best efforts to interpret the data available. erstand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	A LIVE					
	eck here if comments are provided on back of form. Were latitude and longitude in Section A provided by a	AND ALLA					
N Ch	eck here if attachments. licensed land surveyor? X Yes T No	AV V OPROFE SU'S					



IMPORTANT: In these spaces, copy	the corresponding information from Secti	on A.	FOR INSURANCE COMPANY USE
Building Street Address (including Ap 503 Camille Circle	ot., Unit, Suite, and/or Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:
^{City} Waveland	State MS	ZIP Code 39576	Company NAIC Number:
SECTIO	N D - SURVEYOR, ENGINEER, OR A	RCHITECT CI	ERTIFICATION (CONTINUED)
Copy both sides of this Elevation Cer	tificate for (1) community official, (2) insur	ance agent/com	pany, and (3) building owner.
Comments C2a = building slab. C	22e= air conditioner pad. C2f and g)=	existing grade	S
	1	Data	
Signature Faul A. O	4	Date 05/09/	2016
SECTION E – BUILDING EL	EVATION INFORMATION (SURVEY N	IOT REQUIRE	D) FOR ZONE AO AND ZONE A (WITHOUT BFE)
	mplete Items E1–E5. If the Certificate is ir f available. Check the measurement used.		ort a LOMA or LOMR-F request, complete Sections A, B, and only, enter meters.
 Provide elevation information for grade (HAG) and the lowest adjace 		xes to show whe	ether the elevation is above or below the highest adjacent
A 10	, , , , , , , , , , , , , , , , , , , ,		feet meters above or below the HAG.
			feet meters above or below the LAG.
Sile Marketing M to No. 1994 (1996)	ermanent flood openings provided in Section	on A Items 8 and	
PACK TO THE TOTAL THE TAX TO THE PACK THE TAX TO THE TA	2.b in the diagrams) of the building is		☐ feet ☐ meters ☐ above or ☐ below the HAG. ☐ feet ☐ meters ☐ above or ☐ below the HAG.
3. Attached garage (top of slab) is	-		
	or equipment servicing the building is	floor cloyeted in	☐ feet ☐ meters ☐ above or ☐ below the HAG. n accordance with the community's floodplain managemen
	Unknown. The local official must certify th		
SECTIO	N F – PROPERTY OWNER (OR OWN	ER'S REPRES	SENTATIVE) CERTIFICATION
ne property owner or owner's author one AO must sign here. The stateme	ized representative who completes Section ents in Sections A, B, and E are correct to	ns A, B, and E for the best of my kr	r Zone A (without a FEMA-issued or community-issued BFE nowledge.
roperty Owner or Owner's Authorized	Representative's Name		
ddress		City	State ZIP Code
ignature		Date	Telephone
omments			
			Check here if attachment
recurrence de la company (n. 150 e. 150 m.). A sur la companya de la companya de la companya de la companya de	SECTION G - COMMUNITY I	NFORMATION	I (OPTIONAL)
			nagement ordinance can complete Sections A, B, C (or E), a ment used in Items G8–G10. In Puerto Rico only, enter mete
			ed and sealed by a licensed surveyor, engineer, or archite e of the elevation data in the Comments area below.)
The first of the second of the second	ed Section E for a building located in Zone ems G4–G10) is provided for community f	000000	MA-issued or community-issued BFE) or Zone AO. gement purposes.
4. Permit Number	G5. Date Permit Issued	G6.	. Date Certificate Of Compliance/Occupancy Issued
7. This permit has been issued for	: New Construction Substantia	al Improvement	
	(including basement) of the building:		☐ feet ☐ meters Datum
9. BFE or (in Zone AO) depth of floo			feet meters Datum
10.Community's design flood elevat	ion:		☐ feet ☐ meters Datum
ocal Official's Name		Title	
ommunity Name		Telephone	
gnature		Date	
omments			
			Check here if attachment

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt. 503 Camille Circle	, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
City Waveland	State ZIP Code MS 39576	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Front view 05/09/2016



FEMA Form 086-0-33 (7/12) Replaces all previous editions.

BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy t	Section A.	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt 503 Camille Circle	., Unit, Suite, and/or Bldg. No.) or PC	D. Route and Box No.	Policy Number:
City Waveland	State MS	ZIP Code 39576	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

Rear view 05/09/2016



U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

					- PROPERTY I		ATION	FC	OR INSURANCE C	OMPANY USE
	Building Owner's Name Th				AND THE RESERVE AND THE PROPERTY OF THE PROPER				licy Number:	
A2.	Building Street Address (inc 503 Camille Circle	eluding Apt.	, Unit, Suite, and,	or Bldg			No.		mpany NAIC Numb	er:
	^{City} Waveland					e MS		ZIP	^{Code} 39576	
	Property Description (Lot an Part of Tax Parcel #162	2H-0-03-0	18.00 (building	24)						
	Building Use (e.g., Resident Latitude/Longitude: Lat. 3					ential				
A6.	Attach at least 2 photograp Building Diagram Number	hs of the bu			g. <u>89d22'48.2"</u> being used to ob	tain flood	insurance.	ntal Dat	um: NAD 19	27 🗷 NAD 1983
	For a building with a crawls		losure(s):			A9. For	a building with a	ın attacl	ned garage:	
	a) Square footage of crawls			<u>na</u>	sq ft	3.5	Square footage		0 0	<u>na</u> sq ft
	b) Number of permanent floor enclosure(s) within 1.	ood opening O foot abov	gs in the crawlspa e adjacent grade	ne <u>na</u>		b)	Number of perm within 1.0 foot a	anent fl	ood openings in liacent grade	the attached garage
	c) Total net area of flood of		Contraction of the contraction o	<u>na</u>	sq in	c)	Total net area of	flood o	penings in A9.b	_na sq in
7	d) Engineered flood openir	ngs?	Yes 🛛 No			d)	Engineered floo	d openir	ngs? 🗌 Yes	⊠ No
		SECT	ION B - FLOO	D INSU	RANCE RATE I	MAP (FI	RM) INFORM	ATION		
B1.	NFIP Community Name & Co		umber		B2. County Nam	е				State
B4.	City of Waveland 285262 Map/Panel Number B5. S		B6. FIRM Index	Date	Hancock B7. FIRM Panel	-ffective/	B8. Flood Zo	ne(c)	Ms Race Flood	Elevation(s) (Zone
	28045C0342	D	10/16/200		Revised Dat 10/16/2	e ´	AE	110(3)		se flood depth)
	Indicate the source of the B					tered in It	em B9:			
	☐ FIS Profile ☐ FIRM		nity Determined		her/Source:	ID 1000				
	Indicate elevation datum us Is the building located in a C		A CONTRACTOR OF THE SECOND	NGVD		D 1988	Other/So		Yes 🕅 No	
	Designation Date:/				□ OPA	i wise i ic	rected Alea (OF	٦): ـ	les Mino	
-		SECTION	A C PILIDIN		ATION INFORM	MATION	(CUDVEY DE	MDEE		
	Building elevations are base									
	A new Elevation Certificate	will be requ		ruction o	f the building is c	omplete.	Construction	42.00	Finished Constru	
	Elevations – Zones A1–A30, C2.a–h below according to t Benchmark Utilized: <u>GPS F</u>	he building	diagram specified	d in Item	A7. In Puerto Ric	o only, en	iter meters.	AR/AH, A	AR/AO. Complete	Items
										
3	Indicate elevation datum use Datum used for building elev	ations mus	t be the same as	that us	ed for the BFE.	NGVD 19			Other/Source: _ urement used.	(11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	a) Top of bottom floor (include	_	ent, crawlspace,	or enclo	sure floor)	<u>19</u> . <u>5</u>	×	feet	☐ meters	
	b) Top of the next higher floo				Par Vo	<u>na</u>	1000		☐ meters	
	c) Bottom of the lowest hori		tural member (V	Zones o	nly)	<u>na</u>	<u> </u>		meters	
	d) Attached garage (top of se) Lowest elevation of mach		ilamont conviolad	the buil	ding	<u>na</u> 19 _ 5			meters	
	(Describe type of equipme	ent and loca	ation in Comment	s)	uing		-		meters	
	 Lowest adjacent (finished Highest adjacent (finished 	, ,			-	<u>18</u> . <u>8</u> 19 . 0	-		☐ meters	
	n) Lowest adjacent grade at		100 m	Sign of the same	cluding	na .		9	☐ meters ☐ meters	
	structural support			otalio, ii				1001	Писсез	
		SECTIO	N D - SURVE	OR. E	NGINEER, OR A	RCHITE	CT CERTIFIC	ATION		
This ce	rtification is to be signed an	d sealed by	a land surveyor,	enginee	r, or architect aut	orized by	law to certify el	evation		
nforma under	ation. I certify that the inform stand that any false stateme	ation on thi nt may be p	s Certificate repre unishable by fine	esents m	v best efforts to in	terpret th	ne data available.		48 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	A. Live
	ck here if comments are pro- ck here if attachments.	vided on ba			itude and longitud land surveyor?	e in Sect Yes	ion A provided by No	/ a	ALLE STATES	NO PROFESS CO SURVEYOR 92
Paul	er's Name A. Liles					License 1 3174	Number		7	ne s
Title Profe	ssional Surveyor			Compan	y Name do Patano				12/	TO COLOR
Addres	S	Λ .1		City		State	ZIP Cod			PS-3174
Signatu	Popps Ferry Road, Suite	A-4		Biloxi Date		MS Telephone	39532			MISS
	taul a.	8		12/10/2	2015	(228) 38			100	PARARARARARA

ELEVATION CERTIFICATE, page 2

, page 1				r
IMPORTANT: In these spaces, copy the corr				FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, 503 Camille Circle				Policy Number:
City Waveland	State MS	ZIP Code 39576		Company NAIC Number:
SECTION D - S	SURVEYOR, ENGINEER, OR	ARCHITECT CE	RTIFICATION (C	ONTINUED)
Copy both sides of this Elevation Certificate f		The state of the s		g owner.
Comments C2a = building slab. C2e= pro	oposed air conditioner pad. C	2f and g)=existi	ng grades	
	·			
Signature Faul a b		Date 12/10/2		
SECTION E – BUILDING ELEVATIO	N INFORMATION (SURVEY	NOT REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete I For Items E1–E4, use natural grade, if availab	tems E1–E5. If the Certificate is i le. Check the measurement used	ntended to suppo I. In Puerto Rico o	rt a LOMA or LOMR- nly, enter meters.	request, complete Sections A, B,and C.
E1. Provide elevation information for the follow grade (HAG) and the lowest adjacent grad	wing and check the appropriate be e (LAG).	oxes to show whe	ther the elevation is	above or below the highest adjacent
a) Top of bottom floor (including basemen			feet mete	
b) Top of bottom floor (including basemen			☐ feet ☐ mete	
E2. For Building Diagrams 6–9 with permanen		ion A Items 8 and		V2000
the next higher floor (elevation C2.b in the	diagrams) of the building is		☐ feet ☐ mete	
E3. Attached garage (top of slab) is	-	• ——	☐ feet ☐ mete	
E4. Top of platform of machinery and/or equip			☐ feet ☐ mete	
E5. Zone AO only: If no flood depth number is ordinance? ☐ Yes ☐ No ☐ Unknow	available, is the top of the botton n. The local official must certify th			e community's floodplain management
SECTION F - P	PROPERTY OWNER (OR OWI	NER'S REPRES	ENTATIVE) CERT	IFICATION
The property owner or owner's authorized repr				EMA-issued or community-issued BFE) or
Zone AO must sign here. The statements in S Property Owner or Owner's Authorized Represe		the best of my kn	owiedge.	
Address		City	Sta	te ZIP Code
Signature		Date	Tele	ephone
Comments				
				Check here if attachments.
	SECTION G - COMMUNITY	INFORMATION	(OPTIONAL)	
The local official who is authorized by law or ord G of this Elevation Certificate. Complete the ap	linance to administer the commun plicable item(s) and sign below. Cr	ity's floodplain mar neck the measuren	nagement ordinance nent used in Items G	can complete Sections A, B, C (or E), and 8–G10. In Puerto Rico only, enter meters.
G1. The information in Section C was take who is authorized by law to certify elements.	ten from other documentation the evation information. (Indicate the	at has been signe source and date	d and sealed by a li of the elevation da	censed surveyor, engineer, or architect a in the Comments area below.)
G2. ☐ A community official completed SectionG3. ☐ The following information (Items G4-		70		nity-issued BFE) or Zone AO.
G4. Permit Number	G5. Date Permit Issued	100 mm - 100		Compliance/Occupancy Issued
G7. This permit has been issued for:	lew Construction	al Improvement		
G8. Elevation of as-built lowest floor (including			☐ feet ☐ meter	s Datum
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		☐ feet ☐ meter	s Datum
G10. Community's design flood elevation:			☐ feet ☐ meter	s Datum
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
Comments				
			41.11	Check here if attachments.

U.S. DEPARTMENT OF HOMELAND SECURITY FIDERAL AMERGENCY MANAGEMENT AGENCY	ELEVATI	ION CER	TIFIC	ATE	OMB No. 1660	0-0008
National Flood Insurance Program		llow the instructi				e: July 31, 2015
503 Camille Circle		- PROPERTY I	- Laboratoria de la constitución de	TION	FOR INSURANCE	COMPANY USE
A1. Building Owner's Name The Housing Auth	hority of the Ci	ty of Wavelar	nd		Policy Number:	
A2. Building Street Address (including Apt., Unit, S 500 Camille Court, Building No.2	uite, and/or Bldg. 24	No.) or P.O. Rout	e and Box		Company NAIC Num	
^{City} Waveland		Sta	^{te} MS		ZIP Code 39576	
A3. Property Description (Lot and Block Numbers, Part of Tax Parcel #162H-0-03-018.00	Tax Parcel Numbe	r, Legal Descripti	on, etc.)			
A4. Building Use (e.g., Residential, Non-Residentia			ential			
A5. Latitude/Longitude: Lat. <u>30d17'14.4"</u> A6. Attach at least 2 photographs of the building in A7. Building Diagram Number <u>1A</u>		. <u>89d22'48.2"</u> being used to ol	tain flood	—— Horizontal insurance.	Datum: NAD 1	.927 × NAD 1983
A8. For a building with a crawlspace or enclosure(s	2000000		A9. For	a building with an at	tached garage:	
Square footage of crawlspace or enclosure Newstand of agreement flood agree in the standard of the st		sq ft		Square footage of at		<u>na</u> sq ft
 Number of permanent flood openings in the or enclosure(s) within 1.0 foot above adjace 			b) [Number of permaner within 1.0 foot above	nt flood openings ir e adjacent grade	n the attached garage
c) Total net area of flood openings in A8.b	<u>na</u>	sq in		Total net area of floo		nasq in
d) Engineered flood openings? Yes	⊠ No		d) E	Engineered flood op	enings? 🗌 Yes	⊠ No
	– FLOOD INSU	RANCE RATE	MAP (FI	RM) INFORMATIO	ON	
B1. NFIP Community Name & Community Number City of Waveland 285262		B2. County Nan Hancock			B3. Ms	. State S
B4. Map/Panel Number B5. Suffix B6. FIR	RM Index Date	B7. FIRM Panel Revised Da		B8. Flood Zone(s		od Elevation(s) (Zone ase flood depth)
28045C0342 D 1	0/16/2009	10/16/2		AE	AO, use bi	18
B10. Indicate the source of the Base Flood Elevation ☐ FIS Profile ☐ FIRM ☐ Community Det B11. Indicate elevation datum used for BFE in Item I B12. Is the building located in a Coastal Barrier Res Designation Date://	termined	ner/Source: 1929 🔀 NA BRS) area or Oth	VD 1988	☐ Other/Source		
		OPA	MATION	(SURVEY REQUIF	NED)	
*A new Elevation Certificate will be required wh		f the building is o	complete.		Finished Const	
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE C2.a–h below according to the building diagram Benchmark Utilized: GPS RTK-Trimble VRS	n specified in Item	A7. In Puerto Ri	co only, en	E, AR/A1–A30, AR/A ter meters. AVD 1988	H, AR/AO. Complet	te Items
Indicate elevation datum used for the elevation					□ Other/Source:	
Datum used for building elevations must be the			11010 101		easurement used.	***************************************
a) Top of bottom floor (including basement, cra	wispace, or enclos	sure floor)	<u>19</u> . <u>5</u>	Ifeet	meters	
b) Top of the next higher floor		-	<u>na</u>		☐ meters	
c) Bottom of the lowest horizontal structural m	ember (V Zones o	nly)	<u>na</u>	feet	☐ meters	
d) Attached garage (top of slab)		-	<u>na</u> ,	feet	☐ meters	
 e) Lowest elevation of machinery or equipment (Describe type of equipment and location in 		ding	<u>19</u> . <u>5</u>	🔀 feet	meters	
f) Lowest adjacent (finished) grade next to buil	lding (LAG)	-	<u>16</u> . <u>8</u>	X feet	□ meters	
g) Highest adjacent (finished) grade next to bui	lding (HAG)		<u>17</u> . <u>5</u>	Ifeet	☐ meters	
 h) Lowest adjacent grade at lowest elevation of structural support 	f deck or stairs, in	cluding	<u>na</u>	feet	☐ meters	
SECTION D -	SURVEYOR, EN	IGINEER, OR	ARCHITE	CT CERTIFICATION	ON .	
This certification is to be signed and sealed by a land information. I certify that the information on this Certifi	surveyor, enginee icate represents m	r, or architect aut	horized by nterpret th	law to certify elevati e data available.	on	
I understand that any false statement may be punishab			v U.S. Code	e, Section 1001.	410 10	A. L.

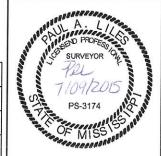
■ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a

▼ Check here if attachments.

licensed land surveyor? X Yes ☐ No

Certifier's Name Paul A. Liles License Number 3174 Title Professional Surveyor Company Name Machado Patano Address 1641 Popps Ferry Road, Suite A-4 City Biloxi State MS ZIP Code 39532 Date 07/09/2015 Telephone (228) 388-1950 Signature



ELEVATION CERTIFICATE, page 2

ELLANISON OLIVINIONIL, page 2						
IMPORTANT: In these spaces, copy the co	rresponding information from Sec	tion A.		FC	OR INSURANCI	E COMPANY USE
Building Street Address (including Apt., Uni 500 Camille Court, Building No.24		oute and Box No.		Po	licy Number:	
City Waveland	State MS	ZIP Code 39576		Co	ompany NAIC Nu	mber:
SECTION D -	- SURVEYOR, ENGINEER, OR	ARCHITECT CE	RTIFICATION	ON (CON	TINUED)	
Copy both sides of this Elevation Certificate	e for (1) community official, (2) insu	rance agent/comp	oany, and (3) I	building ov	vner.	
Comments C2e= proposed air condition	ner pad					
C2f and g)=existing grades						
Signature Faul a. Lot		Date 07/09/2	2015			
SECTION E – BUILDING ELEVATI	ON INFORMATION (SURVEY	NOT REQUIRED) FOR ZON	E AO AN	ID ZONE A	WITHOUT BFE)
For Zones AO and A (without BFE), complete For Items E1–E4, use natural grade, if availa	Items E1–E5. If the Certificate is i	ntended to support. In Puerto Rico of	rt a LOMA or nly, enter met	LOMR-F re	quest, comple	te Sections A, B,and C.
E1. Provide elevation information for the foll grade (HAG) and the lowest adjacent grade.	ide (LAG).	oxes to show whet	ther the eleva	tion is abo	ove or below th	e highest adjacent
a) Top of bottom floor (including baseme			☐ feet ☐	100 m	100 mm	below the HAG.
b) Top of bottom floor (including baseme		ion Altonio Cond	feet C			☐ below the LAG.
E2. For Building Diagrams 6–9 with permane the next higher floor (elevation C2.b in the next higher floor)		ion A Items 8 and,			American Colors	
E3. Attached garage (top of slab) is	ie diagrama, or the bullding is		☐ feet ☐		49-14-15	☐ below the HAG. ☐ below the HAG.
E4. Top of platform of machinery and/or equ	inment servicing the huilding is		☐ feet ☐	25		below the HAG.
E5. Zone AO only: If no flood depth number is						
	wn. The local official must certify the			THE COO	minute of not	apiani management
SECTION F -	PROPERTY OWNER (OR OW	NER'S REPRES	ENTATIVE)	CERTIFI	CATION	
The property owner or owner's authorized re Zone AO must sign here. The statements in Property Owner or Owner's Authorized Repre	Sections A, B, and E are correct to	ns A, B, and E for the best of my kn	Zone A (witho owledge.	out a FEMA	-issued or con	nmunity-issued BFE) or
Address		City		State	ZIP Co	ode
Signature		Date		Telepho		
Comments						
		No.				70 T. C. T.
					Check	here if attachments.
	SECTION G - COMMUNITY					
The local official who is authorized by law or o G of this Elevation Certificate. Complete the a	rdinance to administer the communi pplicable item(s) and sign below. Cr	ty's floodplain mar leck the measurem	agement ordi nent used in It	nance can ems G8–G	complete Sect 10. In Puerto I	ions A, B, C (or E), and Rico only, enter meters.
G1. The information in Section C was to who is authorized by law to certify a	elevation information. (Indicate the	source and date	of the elevat	ion data ir	the Commen	ts area below.)
G2. A community official completed Sec G3. The following information (Items G4					ssued BFE) or	Zone AO.
G4. Permit Number	G5. Date Permit Issued	G6.	Date Certifica	te Of Com	pliance/Occup	pancy Issued
	the state of the s	al Improvement			***************************************	
G8. Elevation of as-built lowest floor (includi				meters	Datum	
G9. BFE or (in Zone A0) depth of flooding at	the building site:			meters		
G10.Community's design flood elevation:			☐ feet ☐	meters	Datum	
Local Official's Name		Title				
Community Name		Telephone				
Signature		Date				
Comments					HIII COMMON PROPERTY.	
					Check	here if attachments.